



Forest of Dean
— DISTRICT COUNCIL —

CABINET

08 March 2018

LD.602

Subject	COMMUNITY RIGHT TO BID THE DILKE COMMUNITY HOSPITAL, CINDERFORD				
Accountable member	Councillor Paul Hiatt, Cabinet Member for Community Tel: 01594 812 Email:				
Accountable officer	Claire Hughes, Legal Team Manager and Monitoring Officer Tel: 01594 812515 Email: claire.hughes@fdean.gov.uk				
Summary	The Council has received a nomination from Cinderford Town Council for The Dilke Community Hospital, Cinderford to be included on the Register of Community Assets.				
Annexes	Annex A – Nomination Form Submitted by Cinderford Town Council. Annex B – Letter from Gloucestershire Care Services				
Recommendation	<i>Cabinet agrees that the nomination meets the statutory test and The Dilke Community Hospital, Cinderford should be listed on the Register of Community Assets.</i>				
Corporate priorities					
Implications (details at end of report)	LEGAL	FINANCIAL	RISK	EQUALITIES	SUSTAINABILITY
	YES	NO	NO	NO	NO

1. BACKGROUND AND REASONS FOR RECOMMENDATION

1.1. The Community Right to Bid provides communities with an opportunity to ensure that buildings and amenities of community value remain in public use. The power was conceived for use in relation to assets such as the local pub, village shop, community centre, library building, etc. The aim of the Act is to help the community keep assets in community use and it should not be seen as a tool to block and/or delay developments.

1.2. The list of assets of community value is maintained by the Council and land may be entered onto the list in response to community nominations. The Council is obliged to place nominations on the list if it is within the Council's area and if it is, in the opinion of the Council, of community value. The Council must determine nominations within 8 weeks.

1.3. The legislation provides two possible constructions of community value:
either:

(a) the land and buildings have an actual current use that is more than ancillary and furthers the social wellbeing or interests of the local community and it is realistic to think that there can continue to be a more than ancillary use that furthers the social wellbeing or interests of the local community, be this in the same or another way.

or:

(b) the land or buildings were in the recent past used (and that use was more than ancillary) to further the social wellbeing or interests of the local community and it is realistic to think that there is a time in the next 5 years when the land and buildings could be put to a more than ancillary use that would further the social wellbeing or interests of the local community, be this in the same or another way.

In this context 'social interests' includes cultural, recreational and sporting interests.

1.4. To meet the test applicants should be able to demonstrate the community use by way of examples, e.g. shopping, sports, community clubs etc. They should also be able to identify how the community use would continue in the future e.g. will the asset continue to be a pub or will be it developed into a pub with a shop and library element.

1.5. If Cabinet determine that the nominated land or buildings should be entered onto the community assets register, the owner of the land or buildings will be notified and a statutory procedure will apply before the owner is able to make a 'relevant disposal' of the land. A relevant disposal includes a sale of the freehold or in certain circumstances, the grant of a lease. The owner is required to notify the Council of their intention to make a relevant disposal; there will then be a 6 week interim moratorium in which community interest groups can request to be treated as a potential bidder for the asset. If such a request is received, there will be a 6 month moratorium to allow the group to raise funds.

- 1.6. If Cabinet determine that the nominated land or buildings should be entered onto the community assets register, the owner of the land or buildings will be notified and a statutory procedure will apply before the owner is able to make a 'relevant disposal' of the land. A relevant disposal includes a sale of the freehold or in certain circumstances, the grant of a lease. The owner is required to notify the Council of their intention to make a relevant disposal; there will then be a 6 week interim moratorium in which community interest groups can request to be treated as a potential bidder for the asset. If such a request is received, there will be a 6 month moratorium to allow the group to raise funds.

2. CINDERFORD TOWN COUNCIL NOMINATION

- 2.1. The nomination from Cinderford Town Council is attached at Annex A.
- 2.2. The applicant states that the Dilke Hospital is a much loved community site and is well used as a community hospital. Future use of the site by the current owner is subject to public consultation.

In the event that the site is no longer used as a community hospital, the Town Council wishes to see the site retained for the benefit of the community. Although there are no plans at present of how this will be achieved, the intention is that the site should continue to be used in providing services that support the health and well-being of the local community.

3. OWNERS' RESPONSE

- 3.1. A response from Gloucestershire Care Services was received on the 16 February 2018 and is attached at Annex B.
- 3.2. Gloucestershire Care Services have not raised any objection to the nomination received and stated that 'should the site no longer be required for the provision of community hospital services, options for the disposal will be progressed in a manner which recognises its history and legacy'.

4. ANALYSIS OF THE STATUTORY TEST

- 4.1. The Dilke Community Hospital is currently open and providing health care to the Town and surrounding Parishes. Therefore the relevant test to be considered is as set out in paragraph 1.3 (a) above. This means that there are two key elements which need to be met:
 - The land and buildings have an actual current use that is more than ancillary and furthers the social wellbeing or interests of the local community; and
 - It is realistic that a use (whether the same as the existing use or otherwise) that furthers the social wellbeing or interests of the local community can continue.

- 4.2. Addressing the first part of the test it is clear that the Dilke Hospital is operational and members can be satisfied that an actual use exists. This satisfied part 1 of the test.
- 4.3. Turning to the second part of the test, Cinderford Town Council have stated their intention to retain the site as an asset for the community. On this basis the second part of the test is also satisfied.

5. COMPENSATION

Private owners of land are able to claim compensation for any loss or expense that they would not have incurred, but for the listing of the land. In most cases where the land is in private ownership, they would be entitled to claim compensation from the Council if the land was listed.

6. RECOMMENDATION

- 6.1. It is recommended that the statutory test is met and therefore The Dilke Community Hospital, Cinderford should be listed on the Register of Community Assets.

7. ALTERNATIVE OPTIONS

- 7.1. The Council has a duty to determine the nomination by reference to the statutory test of Community Value. If the Cabinet disagrees with the recommendation it may refuse to list the asset on the Register of Assets of Community Value.

Legal implications	<p>It is a requirement under the Localism Act 2011 for the Council to have in place a Register of Assets of Community Value and determine nominations to include land on this Register.</p> <p>Should the nominated land be included on the Register of Community Assets, before the owner is able to make a disposal of the land a statutory procedure will apply. This procedure allows community interest groups to notify the owner that they wish to be treated as a potential bidder for the community asset. Following which there is a 6 month moratorium period to allow the group time to raise funds.</p>
Financial Implications	<p>Private owners of land are able to claim compensation for any loss or expense that they would not have incurred, but for the listing of the land. As this land is in private ownership the right to compensation would apply.</p>

BACKGROUND PAPERS

The following documents have been identified by the author of the report in accordance with section 100D.5(a) of the Local Government Act 1972 and are listed in accordance with section 100 D.1(a) for inspection by members of the public:

- Community Right to Bid policy – Cabinet 6 September 2012

These documents will be available for inspection at the Council Offices, Coleford during normal office hours for a period of up to four years from the date of the meeting. Please contact the author of the report.

ASSETS OF COMMUNITY VALUE NOMINATION FORM

1. Details of organisation submitting the nomination form:-

Contact Details	
Name of organisation	CINDERFORD TOWN COUNCIL
Contact name	MRS LYUDA THOMAS
Address of contact	ST. ANNAL'S HOUSE, BELLE VUE CENTRE, CINDERFORD
Post code	GL14 2AB
Phone number[s]	01594 822599
e-mail address	clck@cinderfordtowncouncil.gov.uk

Please indicate which type of eligible organisation you are	
A Neighbourhood Forum	
A Parish Council	✓
An Unincorporated Body [see appendix 1 for names and addresses]	
A Charity	
A Company Limited by Guarantee	
An Industrial & Provident Society	
A Community Interest Company	

2. Details of nominated asset:-

What is your local connection to the nominated asset?
REPRESENTING CINDERFORD PARISHIONERS

Please provide details of the land and/or building you wish to nominate
DILKE COMMUNITY HOSPITAL

Please confirm that the nominated asset is outside one of the categories that cannot be assets of community value

CONFIRMED

What is the current or recent non-ancillary use of the land and/or building?

COMMUNITY HOSPITAL

3. Is the asset of community value?

Why do you believe the asset is of community value?

MUCH LOVED
COMMUNITY SITE

- What is the 'local community' of the building/property/land as defined by the geographical area? This could be the local ward, city or a wider geographical area.

CINDERFORD and adjoining PARISHES

- What is the current/recent use of the building/property/land?

HOSPITAL

- How well is/was the building/property/land used?

VERY WELL USED

- What will the impact be if the usage ceases? If usage has ceased already, what has the impact been?

AWAITING OUTCOME OF PUBLIC CONSULTATION

- Does it/did it meet the social interests of the community as a whole and not the users/customers of a specific service?

Yes

- How is the building/property/land regarded by the community?

IN VERY HIGH REGARD and CONSIDERED IT SHOULD BE USED FOR THE BENEFIT OF THE COMMUNITY

4. Future usage

Why do you believe the asset will continue to be of community value?

- What is the proposed future use of the building/property/land and will it meet the social interests of the community as a whole and not the users/customers of a specific service?

UNKNOWN AT THE PRESENT TIME

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Gloucester Business Park
Brockworth
Gloucester
GL3 4AW

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Email: kevin.adams@glos-care.nhs.uk

Mrs Claire Hughes
Legal Team Manager
Forest of Dean District Council
High Street
Coleford
GL16 8HG

16 February 2018

Dear Claire

Community Right to Bid – Localism Act 2011
Your Ref: MB/ACV/Dilke Memorial Hospital

Thank you for your letter of 29 January which has been passed to me for attention.

I can confirm Gloucestershire Care Services NHS Trust are the freeholder of the Dilke Hospital and do not wish to make representations with regard to Cinderford Town Council's community nomination of said property under the Localism Act 2011.

We fully recognise local feelings regarding the Dilke Hospital and its unique history. The council's nomination form states that the asset is a "much loved community site" that it is "very well used" and this is probably unquestionable, indeed our recent public consultation on the future Forest of Dean hospital provision evidenced the same.

Throughout the public consultation referenced above, we made it clear that the future of both The Dilke Hospital and Lydney Hospital sites will be an important consideration for the GCS Trust Board and that cultural heritage would be taken into account in any new hospital development.

It has always been our ambition that, should either site no longer be required for the provision of community hospital services, options for disposal will be progressed in a manner which recognises their history and legacy. We know this ambition is shared with the Forest of Dean District Council, who have indicated their wish to work with us should either or both sites no longer be required by the NHS.

Furthermore we have also been clear that any receipts associated with the sale of either or both sites will be reinvested in local NHS services, ensuring that the funding remains within the Forest of Dean for the benefit of the local community.

Yours sincerely



Kevin Adams
Head of Estates and Facilities